ARIZONA DEPARTMENT OF **HEALTH SERVICES**

ARIZONA DEPARTMENT OF H	EALTH SERVICES
STATE OF ARIZONA	CERTIFICATE NO
} ss County Of Maricopa	DOCKET NO. EMS 3027
THE ARIZONA DEPARTMENT OF HEALTH SERVICES has found, pursuant to Department of Health Services rules, that public necessity requires the o	under the authority of A.R.S. §36-2232 et seq. and peration of
CITY OF DOUGLAS dba CITY OF DOUGLAS	S AMBULANCE SERVICE
as a ground ALS and BLS ambulance service in the State of Arsick, injured, wounded or otherwise incapacitated or helpless within the following service and response times:	rizona for the transportation of individuals who are ce area, with the following central operations station
 Service area: The City of Douglas, Arizona, and the followin U.S./Mexico border extending from the New Mexico State Line to Douglas; on the East, the Arizona/New Mexico State Line extendi approximately fifty-five (55) miles North to Portal, Arizona; on to on the Central Highway, then East twelve (12) miles to Leslie Carthen east to the New Mexico State Line; on the West, from the U. Central Highway to six (6) miles south of Davis Road. Central Operations Station: Douglas, Arizona (1400 10th Street). Response Times: a. Three (3) minutes on seventy-five (75) percent of all calls. b. Ten (10) minutes on ninety-five (95) percent of all calls. c. Twenty (20) minutes on one hundred (100) percent of all calls. 	o approximately twelve (12) miles West of ing from the Mexico border to he North, six (6) miles South of Davis Road nyon Road, then North to Hill Top area, S./Mexico border extending North along the
Now, therefore, by virtue of the authority vested in the Arizona Depart and laws of the State of Arizona, does hereby grant this RENEWAL CERTIFICATE OF NEC	
authorizing the operation of the aforesaid ambulance service for a period endir unless for cause sooner amended, suspended, revoked or terminated subject Department.	10 January 31 2010
PROVIDED, that this certificate shall not be assigned nor transferred for Health Services.	d unless authorized by the Arizona Department
WITNESS WHEREOF, I	SUSAN GERARD tment of Health Services, have hereunto set my of the Arizona Department of Health Services
to be affixed at Phoenix, Arizona of	on 1-29-07

ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA County Of Maricopa

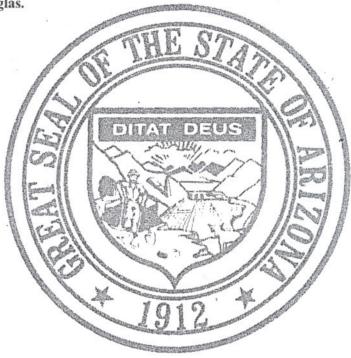
} ss

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3. Response Times (cont.):

Exceptions to "c.":

- 1. Sixty (60) minutes on one hundred (100) percent of all calls to the Portal area and Rucker Canyon area.
- 2. Sixty (60) minutes on one hundred (100) percent of all calls on all areas over thirty (30) miles East of Douglas.



CERTIFICATE OF NECESSITY

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ISSUED 1-29-07
EXPIRES January 31, 2010

DIRECTOR